



STATE OF ARIZONA
DEPARTMENT OF HOUSING
1110 WEST WASHINGTON, SUITE 280
PHOENIX, ARIZONA 85007

(602) 771-1000 WWW.AZHOUSING.GOV
FAX: 602-771-1002

CHECKLIST FOR ACCESSORY STRUCTURE PLAN SUBMITTAL

Item No.	Plan Review Requirement	Check Item
1	Plan review application completed, and plan review fee included	<input type="checkbox"/>
2	All plans, details, and calculations stamped by an engineer registered by the state of Arizona	<input type="checkbox"/>
3	Minimum one original and one copy each of all documents included	<input type="checkbox"/>
4	Included self-addressed stamped envelope for plan documents or other means of return delivery if unable to retrieve plans/documents from office	<input type="checkbox"/>
5	Accessory structures attached to commercial factory-built buildings are to comply with the IBC Accessory structures attached to residential single-family factory-built buildings, manufactured homes, and mobile homes are to comply with the IRC	<input type="checkbox"/>
6	Engineered design analysis calculations for structure(s) noting applicable loads	<input type="checkbox"/>
7	Detailed description of all materials utilized (framing, siding, finishes, electrical, etc....)	<input type="checkbox"/>
8	Dimensioned drawings and details of all components	<input type="checkbox"/>
9	Fastening criteria clearly noted for each component (types, spacing, finishes)	<input type="checkbox"/>
10	Detailed method of attachment of accessory structure to factory-built building, manufactured home, or mobile home	<input type="checkbox"/>
11	Access and ventilation requirements clearly noted (if applicable)	<input type="checkbox"/>
12	Foundation Systems (if applicable)	
	Description of the soil class and the soil bearing pressure	<input type="checkbox"/>
	Footings designed to meet the minimum bearing pressure at the depth required (if applicable)	<input type="checkbox"/>
	Complete set of drawings indicating: A. Dimensions and details of the foundation footing and anchoring B. Complete list of materials C. A cross-identification of how materials will be used in the appropriate view.	A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/>
	Identify supports and tie-down system	<input type="checkbox"/>
	Engineering calculations provided for all load conditions including: A. Wind loads for horizontal, uplift loads, overturning B. Horizontal and torsional earthquake effects on foundations	A <input type="checkbox"/> B <input type="checkbox"/>

EXPEDITED Plan Review Submittal (check one): YES NO

If yes, Engineer's signature and seal required.

Engineer's Signature: _____ Engineer's Seal: